

**SHANKS & HERBERT**

TransPotomac Plaza  
1033 N. Fairfax St.  
Suite 306  
Alexandria, VA 22314  
(703) 683-3600



#9

In re application of: Kozam, et al.

Atty. Docket No. 0106-0001

Appl. No.: 09/423,378

Filed: May 12, 1998

For: Method and Apparatus For The Centralized Collection of Geographically Distributed Data

Assistant Commissioner for Patents  
Washington, D.C. 20231

RECEIVED  
MAR 22 2001  
Group 2100

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 C.F.R. §§ 1.9 and 1.27 is enclosed.
- ☐ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) Claims Remaining After Amendment		(Col. 2) Highest No. Previously Paid For	(Col. 3) Extra
<b>Total</b>	29	minus	25	4
<b>Indep.</b>	6	minus	4	2
<input type="checkbox"/> First Presentation of Multiple Dependent Claims				

SMALL ENTITY			LARGE ENTITY	
Rate	Fee	or	Rate	Fee
x 9 =	\$36	or	x 18 =	\$
x 40 =	\$80	or	x 78 =	\$
+ 130 =	\$	or	+ 260 =	\$
<b>Total</b>	<b>\$116</b>	or	<b>Total</b>	<b>\$</b>

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_. A duplicate copy of this sheet is attached.
- ☒ A check in the amount of \$561.00 (\$116.00 to cover additional claims, \$445.00 to cover extension of time) is enclosed.
- ☐ The U.S. Patent and Trademark Office is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. \_\_\_\_\_. A duplicate copy of this sheet is attached.
- ☐ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims.
- ☐ Any patent application processing fees under 37 C.F.R. § 1.17.

Respectfully submitted,

SHANKS &amp; HERBERT

*Toni-June Herbert*  
Toni-June Herbert  
Reg. No. 34,348

a